IN THE UNITED FOR THE NORTHERN	STATES DISTRICT COU DISTRICT OF CALIFO	RT NOV 2 7 200
	)	NORTHERN DISTRICT OF CALIF
William Brown Plaintiff,	Case no O	596 2
Gerrechinal Trawing Facility etal, Defendant.	PRISONER'S  IN FORMA PAUPER  APPLICATION	RIS CW
	E-filing	( <b>P</b> )
perjury that I am the plaintiff that the information I offer thand correct. I offer this appl to proceed without being requir fees, costs or give security. I am unable to pay the costs of that I believe that I am entitl In support of this application, information:	ication in support sed to prepay the full state that because this action or given do not be sed to relief.	cation is true of my request all amount of se of my poverty re security, and
1. Are your presently employe	ed? Yes No	
If your answer is "yes," state wages per month, and five the n	both your gross and	net galant on
Gross:	Net:	
Employer:		
If the answer is "no," state the amount of the gross and net sale received. (If you are imprison employment prior to imprisonment and the sale of the	ary and wages per model, specify the laster.)	onth which you

	Have you received, within the past twelve from any of the following sources:	(12) months	, any
If the	a. Business, Profession or self employment b. Income from stocks, bonds or royalties? c. Rent payments? d. Pensions, annuities, or life insurance payments? e. Federal or State welfare payments, Social Security or other government source? e answer is "yes" to any of the above, de and state the amount received from each.		No
3. <i>I</i>	are you married? Yes No X		
Spouse	e's Full Name:		
	e's Place of Employment:		
Spouse	e's Monthly Salary, Wages or Income:		
Gross:	Net:		
4. a	. List amount you contribute to your s	pouse's supp	ort:
ł	upon you for support and indicate how toward their support:		
5. I	oo you own or are you buying a home? You	esNo	$\times$
	ted Market Value: \$ Amount of I		
	oo you own an automobile Yes		

Make \_\_\_\_\_ Year \_\_\_ Model \_\_\_\_

Is it financed? Yes \_\_\_\_ No \_\_\_ If so, Total due: \$ \_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

7. Do you have a bank account? (If you are a prisoner funds in your prison account, and provide the certificate signed by an officer of the prison.)	, include attached,
Yes No	
Name(s) and address(es) of bank:	
Present balance(s): \$	
Present balance(s): \$	
Do you have any other assets: (If "yes," provide a descretable and its estimated market value.)  Yes	TIPCION OF
8. What are your monthly expenses? A D Utilities:	
Food: \$ Clothing:	
Monthly Payment Thi	al Owed On is Account
Name of Account	
\$ \$	
9. Do you have any other debts? (List current obligations dicating amounts and to whom they are payable.)	ations, in-
I consent to prison officials withdrawing from my trust paying to the court the initial partial filing for installment payments required by the court.	
I declare under the penalty of perjury that the forego and correct and understand that a false statement herein in the dismissal of my claims.	ing is true n may result
19 1/0107 Wester	
DATE SIGNATURE OF APPLICAL	N.T.

Case Number:
CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT
I certify that attached hereto is a true and correct copy of
the prisoner's trust account statement showing transactions of
[prisoner name] [Villiam Brown 1693463] for the last six months at
[name of institution] where (s) he is confined.
I further certify that the average deposits each month to this
prisoner's account for the most recent 6-month period were \$
and the average balance in the prisoner's account each month for
the most recent 6-month period was \$
Dated:
Authorized officer of the institution